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POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM

Application Number	To Be Assigned
Filing Date	Concurrent Herewith
First Named Inventor	MEYER, Jürgen et al.
Title	Silicas
Art Unit	To Be Assigned
Examiner Name	To Be Assigned
Attorney Docket Number	032301.411

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

25,461

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number

OR

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OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City		State	ZIP
Country			
Telephone	(404) 815-3593	Fax	(404) 685-6893

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			Date	29.04.2005
Name	Jürgen MEYER	Telephone		
Title and Company	DIRECTOR DEGUSCO			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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and AUG 04 2005

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SIGNATURE of Applicant or Assignee of Record

Signature	<i>Stephanie FRAHN</i>	Date	19.04.2005
Name	Stephanie FRAHN	Telephone	+49 6181 596146
Title and Company	DIRECTOR, DEGUSSA AG		

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 and **AUG 04 2005**
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TRADEMARK OFFICE

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SIGNATURE of Applicant or Assignee of Record

Signature	Manfred Ettlinger	Date	April 26, 2005
Name	Manfred ETTLINGER	Telephone	00496181-59-2794
Title and Company	DIRECTOR, JEGUSS AG		

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